

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled in:

**HIGH ENANTIOMERIC PURITY DEXANABINOL
FOR PHARMACEUTICAL COMPOSITIONS**

and for which a patent application:

- ☒ is attached hereto and includes amendment(s) filed on _____ (if applicable)
☐ was filed in the United States on as Application No. _____ (declaration not accompanying application) with amendment(s) filed on _____ (if applicable)
☐ was filed as PCT international Application No. _____ on _____ and was amended under PCT Article 19 on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION			
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED
153277	Israel	4, December 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

* for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	LAST NAME AVIV	FIRST NAME Haim	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Rehovot	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel	
	POST OFFICE ADDRESS	STREET 9 Habrosh Street	CITY Rehovot	STATE OR COUNTRY Israel	ZIP CODE 76234
		SIGNATURE OF INVENTOR 201		DATE	
202	FULL NAME OF INVENTOR	LAST NAME BAR	FIRST NAME Raphael	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Rehovot	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel	
	POST OFFICE ADDRESS	STREET 49 Menuha Venahala Street	CITY Rehovot	STATE OR COUNTRY Israel	ZIP CODE 76247
		SIGNATURE OF INVENTOR 202		DATE	
203	FULL NAME OF INVENTOR	LAST NAME SHICKIER	FIRST NAME Michael	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Mazkeret Batya	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel	
	POST OFFICE ADDRESS	STREET 19 Hamagen Street	CITY Mazkeret Batya	STATE OR COUNTRY Israel	ZIP CODE 76804
		SIGNATURE OF INVENTOR 203		DATE	

2 0 4	FULL NAME OF INVENTOR	LAST NAME AMSELEM	FIRST NAME Shimon	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Rehovot	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Spain	
	POST OFFICE ADDRESS	STREET 10 Miriam Mizrahi Street	CITY Rehovot	STATE OR COUNTRY Israel	ZIP CODE 76551
		SIGNATURE OF INVENTOR 204		DATE	